## BEST MILABLE COP

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

**Application or Docket Number** 

09/806840

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
1	OTAL CLAIMS	· · · · · · · · · · · · · · · · · · ·	(Columi	n 1)	(Colu	ımn 2)		TYPE [		OR	SMALL	ENTITY
TOTAL CLAIMS								RATE	FEE	_	RATE	FEE
FOR			NUMBER FILED		NUME	NUMBER EXTRA		BASIC FE	Ε	OR	BASIC FEE	860
TOTAL CHARGEABLE CLAIMS			/4/minus 20= * /			2/		X\$ 9=		OR	X\$18=	2178
_	DEPENDENT C		3 minus 3 = "					X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	270
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	3308	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	ATATION OF M	Minus	***	F OL 4144	<u> </u>		X40=		OR	X80=	
<u> </u>	FIRST PRESE	ENTATION OF MI	JUITPLE DE	PENDENT	CLAIM			+135=		OR	+270=	
							_ A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)				•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	.**		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=	▎┟	X40=			X80=	
<	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM		-	740=		OR	V00=	
	· · · .			•	. •		Ł	+135=		OR	+270=	
		•					A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
,		(Column 1)		(Colun	nn 2)	(Column 3)					•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	•	Minus	**		=	1.	X\$ 9=		OR	X\$18=	
ME	Independent		Minus	***		=	F	X40=		- 1	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					` <b> </b> -	740-		OR	7,002		
* If the entry in column 1 is loss than the column 2 write "0" is column 2								OR	+270=			
** [	f the "Highest Nu	mber Previously Pa	ld For IN THIS	S SPACE is	less than	20, enter "20."	AE	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (T tal or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION F DETERMINATION RECORD 09/806840													
CLAIMS AS FILE PART I (Column 1) (Column 2)								SMALL EI	YTITY	OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS							. 1	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	)	OR	BASIC FEE	860,	
то	TAL CHARGEA	BLE CLAIMS	49 minus 20=		*	29		X\$ 9=		OR	X\$18=	522	
INDEPENDENT CLAIMS			3 mir	nus 3 =	•	,		X40=		OR	X80=		
MU	/ ` .	DENT CLAIM PI						+135=		OR	+270=		
Cif	auul 4 the difference	in column 1 is	less than zero, enter "0" in column 2				ļ	TOTAL		OR	TOTAL	1382	
If the difference in column 1 is less than zero, enter "0" in column 2  Two new claims, 50 and 57 and add   CLAIMS AS AMENDED PART II  Leef ex cess fees to fave all (Column 2) (Column 3)							u		ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIOI!!	
NDM	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	- 01 4114	=		X40=		OR	X80=	<i>5</i> .	
ــــــا	FIRST PRESE	NTATION OF MU	JUIPLE DEF	ENDEN	CLAIM		'	+135=		OR	+270=		
							ı	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)							
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	Emilyada sa	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**.		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	· OL ALVA	=	<b> </b>	X40=		OR	X80=	, and a	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						<u>ا</u> ا	+135=		OR	+270=		
								TÖTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	·	
	,	(Column 1)		(Colu		(Column 3)	-						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE.	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=	:	OR	X\$18=		
	Independent	,	Minus	***	F O1 411	<u>                                     </u>	╽╽	X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	OLTIPLE DEF	ENDEN	CLAIM		┙╽	+135=	·	OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL					
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										L!			
	The Inighest number Previously Paid For (Total of Independent) is the highest humber tound in the appropriate box in column 1.												

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